

**Survey of
San Diego Physicians
Regarding Proposition 215
and the
Use of Medical Marijuana**

REPORT TO
THE
SAN DIEGO CITY COUNCIL

by
**PATIENT/DOCTOR SUB-COMMITTEE
OF THE
CITY OF SAN DIEGO
MEDICAL MARIJUANA/CANNABIS TASK FORCE**

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EXECUTIVE SUMMARY

More than six years ago the California public spoke out by passing Proposition 215 ensuring that ill Californians have the right to obtain and use marijuana for medical purposes. Efforts to implement Proposition 215 have been hampered by the federal government and a recent ruling by the Supreme Court supporting a finding by Congress that marijuana has no medical use. However, well-controlled studies on the use of medical marijuana are underway. Until then, medical providers (physicians, nurse practitioners, and physician's assistants) and patients complete a full spectrum of opinion on medical marijuana usage: from considering it to be very effective to be only an abusable drug.

Many patients suffering from chronic and serious ailments will attest that marijuana has helped relieve some of their symptoms when other available medications have failed. But physicians that want to allow their patients to try marijuana based on the new state law are concerned that their license could be in jeopardy.

In an effort to discover the opinions of local physicians on the important issues, the Patient/Doctor Sub-Committee of the City of San Diego's Medical Marijuana/Cannabis Task Force distributed surveys to approximately 1,600 San Diego medical providers. Our response rate was high, revealing a significant number of San Diego physicians willing to prescribe (recommend) marijuana and a significant number of patients requesting information about marijuana for their illnesses.

Key Findings Include:

- Providers are being asked about medical marijuana with significant frequency. The 522 physicians responding to the survey indicated they are receiving between 197 and 850 requests for medical marijuana information *each month*.
- Nearly 25% of physicians responding to the survey indicated that they were willing to prescribe medical marijuana to their patients. Forty three percent indicated an unwillingness to prescribe medical marijuana—mainly because they do not believe in its efficacy. This may change when the results of clinical trials are released.
- The majority of respondents (55%) indicated that the availability of information regarding medical marijuana was poor or very poor—pointing out a need for better access to information regarding Proposition 215 and the use of medical marijuana.

Based on our findings, the Patient/Doctor Sub-Committee recommends that:

- Given the need demonstrated by the survey, the City should take all possible action within its authority to facilitate access to medical marijuana by patients qualified under Proposition 215.
- The City of San Diego should begin providing information regarding Proposition 215 and legal issues relating to medical marijuana to both medical providers and interested patients.

BACKGROUND

In 1996 California voters approved the Compassionate Use of Marijuana Act (Proposition 215) with over a 60% majority. In the City of San Diego 56.1 percent of voters favored the Proposition—slightly higher than the 55.6 percent of voters statewide who favored the measure. Proposition 215 was intended to allow a physician to recommend marijuana to a patient when it served a specific medical purpose.

Now six years after the enactment of Proposition 215, patients in the City of San Diego continue to face significant barriers exercising a right granted to them by the voters of California. Unfortunately, both doctors and patients continue to fear prosecution, and have sought clearer direction from local government as to how they can prescribe or use medicinal marijuana.

On May 22, 2001, the City Council adopted Resolution 294886 and created the Proposition 215 Implementation Task Force (Medical Marijuana Task Force). The resolution authorized by the City Council directed the Task Force to focus on these four areas:

- Investigate the existing local Proposition 215 advocacy network
- Monitor local law enforcement efforts
- Monitor medical research efforts
- Monitor and support legislative efforts

To complete our work the Task Force divided into five sub-committees:

- Patient/Doctor Sub-Committee
- Medical Research Sub-Committee
- Legislative Efforts Sub-Committee
- Law Enforcement Sub-Committee
- Patient Advocacy Sub-Committee

At its initial meeting the Patient/Doctor Sub-Committee decided to investigate the local advocacy network regarding Proposition 215 by administering a survey to both medical providers and patients. The Sub-Committee wanted to determine the quality of information and ease of access to information experienced by both patients and their medical providers. The Sub-Committee also wished to determine other information such as the number of physicians willing to prescribe medical marijuana and the frequency with which they received requests for information regarding medical marijuana.

The Sub-Committee successfully surveyed more than 500 San Diego physicians and is in the process of surveying patients. The results of our physician survey along with a discussion of those results are contained in this report.

METHODS

The Sub-Committee developed a ten-question survey targeting medical providers designed to determine:

- 1) Professional status (i.e. physician, nurse, etc.).
- 2) Field of Medicine.
- 3) Average monthly number of requests for medical marijuana.
- 4) Feelings about efficacy of Marinol (a legal drug often used to relieve nausea and stimulate appetite).
- 5) Willingness to prescribe Marinol.
- 6) Availability of information regarding medical marijuana.
- 7) Preferred methods to access medical marijuana information.
- 8) Willingness to prescribe medical marijuana.
- 9) Reasons for not being willing to prescribe medical marijuana.
- 10) Additional comments and recommendations.

The Sub-Committee compiled a list of physicians from the San Diego Medical Society and a local HIV/AIDS directory. A total of 1,636 surveys were mailed. In addition to the written survey, respondents had the option of completing the survey online. Of the 1,636 physicians polled, 522 completed and returned the survey, representing a response rate of 31.9%.

RESULTS

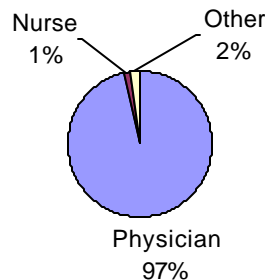
1. Number of Surveys

522 surveys completed
498 paper surveys
24 Internet survey completed
Total Valid Surveys = 522

2. Participant Profile

Figure-1 below indicates that the majority of respondents (97%) were physicians.

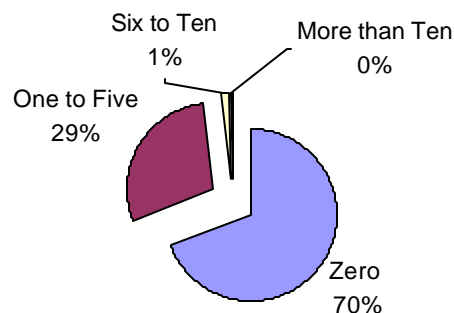
FIGURE-1, PARTICIPANT PROFILE



3. Patient Requests for Medical Marijuana Information

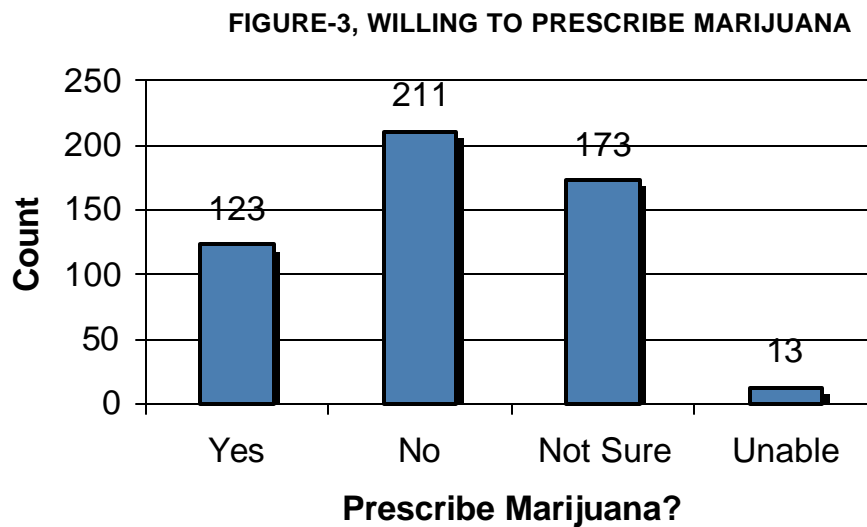
Respondents were asked how many patient requests per month they received for information regarding the use of medical marijuana. The majority (361) responded that they receive no requests for medical marijuana information. However, Figure-2 indicates that 152 (29%) respondents indicated that they receive between one and five requests for information regarding medical marijuana every month. And nine respondents (1%) indicated that they receive more than six requests per month for medical marijuana information.

FIGURE-2, REQUESTS PER MONTH (N=522)



4. Willingness to Prescribe Marijuana

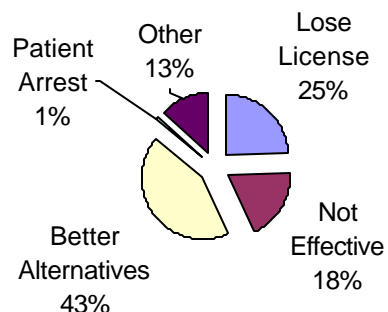
Question 8 of the survey asked respondents if they were willing to prescribe marijuana for medical purposes. Figure-3 below indicates that while 211 participants (40%) stated that they were unwilling to prescribe medicinal marijuana, 123 physicians (23.5%) stated that they *were* willing to prescribe marijuana. Thirty three percent (173) of those surveyed were unsure if they would prescribe marijuana.



5. Reason for Not Prescribing Marijuana

Figure-4 show that of the 211 physicians that indicated they were unwilling to prescribe marijuana, the most frequent response was that they felt there were

FIGURE-4, REASONS FOR NOT PRESCRIBING



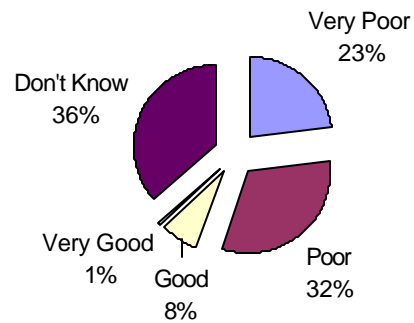
better alternatives. One quarter (25%) of the physicians unwilling to prescribe marijuana stated that losing their license was the reason. Eighteen percent of the respondents did not prescribe medical marijuana because they felt that it was not effective. And 13% of

those unwilling to prescribe medicinal marijuana cited a variety of reasons such as that it is illegal under federal standards.

6. Availability of Medical Marijuana Information

Respondents were asked to rate the availability of information regarding the use and legal status of medical marijuana. In Figure-5, the majority (55%) of respondents indicated that the availability of information was either poor (32%) or very poor (23%). Only 9% of respondents rated the availability of information as either good or very good and more than a third (36%) were unable to rate the availability of information regarding medical marijuana.

FIGURE-5, INFORMATION AVAILABILITY



7. Preferred Method to Access Medical Marijuana Information

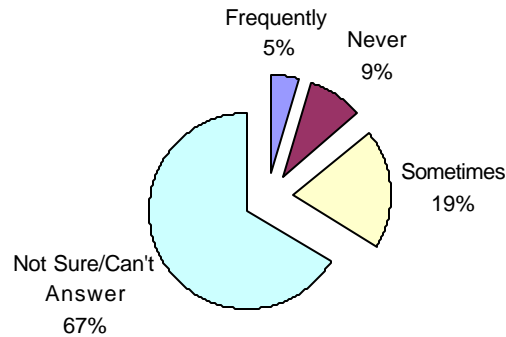
Respondents were asked to indicate the top three methods they would prefer to receive information about Proposition 215 and the legal status of medical marijuana. The results displayed in Table-1 below indicate that the top four preferred methods of receiving information are through another medical provider, the Union Tribune, television and the Internet.

| Table-1, Preference for Accessing Medical Marijuana Information | |
|---|-----|
| Medical Provider | 205 |
| Union Tribune | 199 |
| TV | 176 |
| Web | 164 |
| Government | 148 |
| Newsletter | 140 |
| Community Agency | 110 |
| Support Groups | 56 |
| Other | 56 |
| Community Newsletter | 49 |
| Magazine | 19 |
| Friend | 13 |
| Family | 3 |

8. Use of Marinol

Respondents were asked if they felt that Marinol was a good substitute for

FIGURE-6, MARINOL GOOD SUBSTITUTE?



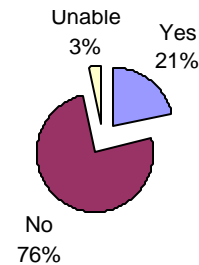
medical marijuana. In Figure-6, the majority of respondents (67%) indicated that they were not sure or could not answer. Only 5% of respondents indicated that they felt that Marinol was frequently a good substitute for medical marijuana, while 19% indicated that Marinol was sometimes a good substitute and 9% felt that Marinol was never a good substitute for medical marijuana.

9. Prescribing Marinol

Respondents were asked if they prescribe Marinol. As Figure-7 indicates, a large majority (76%) indicated that they do not prescribe Marinol.

Only 21% indicated that they prescribe Marinol while 3% responded that they are unable to write prescriptions.

FIGURE-7, PRESCRIBE MARINOL?



10. Field of Medicine

Respondents were asked, "What field of Medicine are you in that you might interface with the medical use of marijuana?" Respondents were given the option of choosing more than one field. The most popular choice was Chronic Pain (267), followed by Cancer, HIV, Other and Glaucoma.

Of the 125 respondents who checked the "other" box, the three most frequent fields of medicine were Family Practice, General Practice and Internal Medicine. Other fields listed frequently were Neurology, Hospice, Rehab and Multiple Sclerosis.

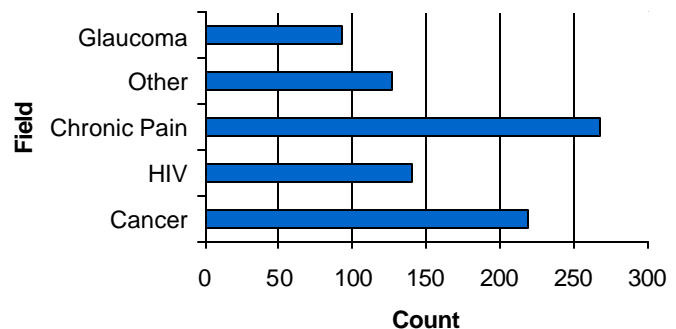


FIGURE-6, FIELD OF MEDICINE (# of responses = 841)

DISCUSSION

Patient Requests for Information

Survey results reveal a significant number of patients are requesting medical marijuana information from their physicians. In fact 152 physicians surveyed indicated that they receive between 1-5 requests for medical marijuana information each month. Another nine physicians indicated that they receive more than 5 requests for information each month. Based on our results we estimate that physicians in our survey group are receiving between 197 and 850 requests *each month* for medical marijuana information.

According to the San Diego Chamber of Commerce, San Diego has 5,650 licensed physicians—more than 10 times the number that returned surveys. Thus the number of San Diego patients requesting medical marijuana from their medical provider each month could easily number in the thousands. It has been six years since Proposition 215 passed and several more years will transpire before current medical marijuana research is completed and disseminated. But is it clear from our survey that patients in large numbers are demanding information and access to a drug that many feel would bring improvements to their quality of life.

Willingness to Prescribe Marijuana

Almost one quarter (23.5%) of providers responding to the survey were willing to prescribe medical marijuana. These numbers are likely to change depending on the results of well-controlled trials. In the meantime, access to a medication that many think is effective is greatly hindered. However, our sample revealed that at least 123 San Diego physicians are now willing to recommend marijuana to their patients.

Reasons for Not Prescribing Marijuana

Of those who do not prescribe medical marijuana 43% said there were better alternatives, but this may change when results of well-controlled trials are available. Another 25% wouldn't prescribe it due to fear of losing their license. The cloud of legal uncertainty has prevented access to a possibly effective medication.

Availability of Medical Marijuana Information

Only 9% of those surveyed indicated the availability medical marijuana information was very good or good. This points out the need for better provider access to information on medical marijuana. The main problem, though, is lack of well-controlled clinical trial information. But with clinical trials underway, peer-reviewed information may be available in a few years.

Accessing Medical Marijuana

Survey results indicate that physicians prefer to access medical marijuana information in a wide range of modalities. No single method of accessing information, such as a Web site or through television, emerged as a clear preference. The wide range of responses indicates that perhaps physicians are searching for information anywhere they can find it

and/or that no reliable source of information currently exists to transmit information regarding Proposition 215 and the use of medical marijuana.

Marinol

Tetrahydrocannabinol (THC), an active ingredient of marijuana, is available as a tablet, Marinol. Some patients feel relief with this, others get more relief from the entire marijuana bud—a complex of chemicals including THC. Inhaled marijuana is delivered quickly to the blood stream, whereas pills or marijuana in food is delivered slowly.

More than two thirds of physicians surveyed were not sure if Marinol was a good substitute for medical marijuana and three-quarters stated that they did not prescribe Marinol. These results suggest that Marinol is not widely used to relieve nausea and vomiting associated with chemotherapy.

RECOMMENDATIONS

- Given the need demonstrated by the survey, the City should take all possible action within its authority to facilitate access to medical marijuana by patients qualified under Proposition 215.
- The City of San Diego should develop a comprehensive plan for providing information regarding Proposition 215 and legal issues relating to medical marijuana to both medical providers and interested patients. Information could be in the form of a Web site, publication or other media that will effectively reach both physicians and their patients.
- The City of San Diego should appoint the Medical Marijuana/Cannabis Task Force to develop a plan for providing information regarding medical marijuana to physicians and interested patients.